Region 9 Application Kit Regular Award

Application Checklist for Regular Awards

Includ	de the original and one copy of the following items in your Application Package:
	APPLICATION FOR FEDERAL ASSISTANCE, <u>SF424</u> , w/original signature, tracking #
	BUDGET INFORMATION (Sections A through F), SF424A
	ASSURANCES (1 through 18), SF424B, with original signature
	Budget Detail and Breakdown by category
	Key People List
	Workplan
	Certification Regarding Debarment, Suspension, and Other Responsibility Matters, <u>EPA Form 5700-49</u> , with authorized Original Signature.
	Certification Regarding Lobbying and Disclosure of Lobbying Activities SF-LLL with authorized Original Signature
	Preaward Compliance Review Report for All Applicants Requesting Federal Financial Assistance, EPA Form 4700-4, with authorized Original Signature
	Procurement System Certification, <u>EPA Form 5700-48</u> , with original signature (Superfund Recipients Only)
-	are a NEW applicant, in order to receive payments from EPA, complete the ving form:
	ACH Vendor/Miscellaneous Payment Enrollment Form - <u>Treasury Form 3881</u> Please mail this form to: U.S. EPA, Region 9 Finance Office (PMD-6) 75 Hawthorne Street San Francisco, CA 94105

Region 9 Application Instructions - Regular Award

SUBMISSION

All applicants must apply for Federal financial assistance on Standard Form 424 (revised 7/97). The final application and workplan should be submitted by the date indicated in the guidance letter accompanying this application kit. All OMB Standard Forms (SF) and Circulars are also available for download at http://www.whitehouse.gov/omb/grants/index.html.

If you are requesting continuation funding for an ongoing Environmental Program Grant under 40 CFR Part 35, Subpart A, your application must be submitted *before* the expiration of the current grant's budget period in order for expenses incurred prior to the subsequent award date to be reimbursed by EPA.

Please submit all items noted on the enclosed Application Checklist to:

Melinda Taplin Grants Management Office, PMD-7 U.S. Environmental Protection Agency 75 Hawthorne Street San Francisco, CA 94105

HOW TO COMPLETE YOUR APPLICATION FOR FEDERAL ASSISTANCE

Based on the inquiries we frequently receive, we have developed the following information to augment the instructions in the "Application for Federal Assistance" (Standard Form 424 and 424A). Reading this information in conjunction with the instructions for the SF-424 and the SF-424A will help ensure that all the necessary information is included with your submission to EPA. Questions regarding completion of the application forms should be referred to the Grants Specialist identified on the guidance letter accompanying this application kit.

APPLICATION FOR FEDERAL ASSISTANCE (SF-424)--FACESHEET

Refer to the pre-printed instructions for the SF-424 on the SF-424 form. Those items not discussed below are considered self-explanatory or adequately explained by the form instructions. Complete all items as instructed. If a particular item does not apply, please indicate N/A.

Item 2: Enter your Region 9 Tracking Number in the Applicant Identifier block.

Item 5: **A Data Universal Numbering System (DUNS) number is now required on all federal applications**. Please include your DUNS number after your address. Your organization may obtain a DUNS number by calling Dun & Bradstreet at 1-866-705-5711 or through the internet at http://eupdate.dnb.com/requestoptions.html.

If the individual you list under "name and telephone number of the person to be contacted for matters involving this application" is not the Project Manager (i.e., the person who will be our contact for technical matters if the application is funded) provide the name, title, address and telephone number of that person on the Key People List.

- Item 6: Employer Identification Number (EIN) is also known as The Taxpayer Identification Number and must be provided.
- Item 7: If the applicant is a non-profit organization, indicate your IRS classification. Organizations classified under 501(c)(4) of the Internal Revenue Code of 1986 which engage in lobbying activities are not eligible for Federal financial assistance.
- Item 9: Insert the name of the EPA program person from whom you have received pre-application assistance. This ensures that your application will be routed to the appropriate EPA office for review.
- Item 10: List the EPA Catalog of Federal Domestic Assistance (CFDA) number and title of the program/project for which you are applying. Refer to the CFDA listing at the end of these instructions.
- Item 11: Provide a brief description of the proposed program or project. A detailed description is included in the workplan or project narrative.
- Item 13: The proposed project start date and ending date should reflect the amount of time required to complete the entire work plan specified in the Application. The start date should be at least sixty days after the submission date of the final application package to EPA.
- Item 14a: Enter the congressional district number where the applicant's office is located.
 - 14b: Enter the congressional district number(s) affected by the program/project. If every district within the State is affected, enter "Statewide."
- Item 15: The amounts under "Estimated Funding" are the amounts of federal dollars requested including any amounts to be contributed by the Applicant or other parties during the budget and project periods.
- Item 16: Executive Order 12372 and EPA's implementing regulation, 40 CFR Part 29, sets forth the Agency's obligations and procedures for consulting with and responding to views expressed by State and local officials on proposed EPA direct development activities and applications submitted for EPA financial assistance. The EPA program/project for which you are applying may be subject to your State's intergovernmental review process. You must contact your State's Single Point of Contact (SPOC) to determine if the grant program was selected for coverage by the State process. The Office of Management and Budget maintains a list of SPOCs at this site: http://www.whitehouse.gov/omb/grants/spoc.html . Applicants must submit or fax page 1 of the application (or summary thereof) to the SPOC.

CALIFORNIA

Grants Coordination State Clearinghouse Office of Planning & Research P.O. Box 3044, Room 212 Sacramento, CA 95812-3044 Telephone: (916) 445-0613 FAX: (916) 323-3018

Email: state.clearinghouse@opr.ca.gov

NEVADA

Heather Elliott
Department of Administration
State Clearinghouse
209 E. Musser Street, Room 200
Carson City, Nevada 89701
Telephone: (775) 684-0209
Fax: (775) 684-0260

Email: helliott@budget.state.nv.us

GUAM

Director

Bureau of Budget and Mgmt. Research

Office of the Governor

P.O. Box 2950 Agana, Guam 96910

Telephone: 011-671-472-2285

Fax: 011-472-2825 Email: jer@ns.gov.gu

NORTH MARIANA ISLANDS

Ms. Jacoba T. Seman Federal Programs Coordinator Office of Management and Budget Office of the Governor Saipan, MP 96950

Telephone: (670) 664-2289

Fax: (670) 664-2272

Email: omb.jseman@saipan.com

Item 18: The application must be signed and dated by the person who has authority to commit the applicant to performance, to compliance with the assurances stated on the SF 424B, and to execute the Assistance Agreement on behalf of the applicant if a grant is awarded. An original signature is required.

BUDGET INFORMATION - NON CONSTRUCTION PROGRAMS (SF-424A)

A complete budget must be submitted in order to be considered for federal assistance. The application includes a two-page sheet, "Budget Information - Non-Construction Programs" (Standard Form 424A), Sections A through F. Complete Sections A, B and F. Complete Section C if estimated funding includes other sources of non-federal funding besides the applicant's cost share. Sections D and E are optional.

Section A - Budget Summary

Columns (a), (b), (c), (d), are not required. Complete columns (e), (f), and (g). Complete column (c) if applying for unobligated federal funds from a prior grant budget (amount must correspond with the unobligated balance of Federal funds reported on your Financial Status Report).

Section B - Budget Categories

Enter the amounts for the COMBINED Federal and non-Federal funds distributed by object class categories under column (5) "Total." Columns (1) - (4) may be used to separately identify the amount of Federal funds, recipient matching contribution, supplemental funds, carryover, etc. Column (5), line k total should be the same as the total amount shown on the SF-424 facesheet under item 15g.

A detailed budget breakdown of column (5) "Total" by object class categories must be prepared and submitted with the application. A sample budget breakdown is attached. (Other formats may be used.) Refer to our Instructions under Section F - Other Budget Information.

Section C - Non-Federal Resources

Complete only if other sources of non-Federal funds are budgeted for your project. Amounts should agree with the amounts budgeted under item 15 on the SF-424 facesheet. Refer to the pre-printed instructions for this item on the SF-424A.

Section D - Forecasted Cash Needs

Optional. Refer to the pre-printed instructions for this item on the SF-424A

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

Optional. Refer to the pre-printed instructions for this item on the SF-424A.

Section F - Other Budget Information. Guidance for completing a Detailed Budget to Supplement Standard Form 424A, Section B - Budget Categories.

A separate, detailed budget is required and must be attached to your Application. Follow the guidelines below to support the amounts budgeted under the following object class categories on the SF-424A:

- Line 6a- **Personnel**. List all participants in the program/project by position title, estimated time on the project, and estimated salary during the project period.
- Line 6b **Fringe Benefits**. Identify the fringe benefit percentage and apply the percentage to the estimated personnel costs.
- Line 6c **Travel**. If travel is budgeted, indicate the general purpose of the travel (e.g., in-State/local travel and out-of State travel), number of travelers, and include estimated costs per trip.
- Line 6d **Equipment**. List all equipment to be purchased and include estimated costs for each item. The Federal government defines equipment as tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Property which does not fall into this category should be listed as supplies, unless your organization defines equipment at a lower threshold.
- Line 6e **Supplies**. Identify the estimated costs for general materials and supplies (i.e. printing, office supplies, etc.).
- Line 6f **Contractual.** List and describe each proposed contractual service, the proposed procurement method (i.e. small purchase, formal advertising, competitive negotiations/RFPs, or non-competitive negotiations/sole source), and the estimated cost of each contract. EPA may require review of contracts prior to their execution to assure all costs are reasonable and necessary to the program/project. Applicants should review EPA's regulations concerning procurement and the need to provide justification for sole source agreements, and documentation of cost and/or price analysis for contracts and other agreements.
- Line 6g Construction. List proposed construction contracts under item 6f Contractual.
- Line 6h **Other**. List all other direct costs which are not included in the above categories (i.e. telecommunication expenses, training, etc.).
- Line 6j **Indirect Charges**. Provide an explanation of how indirect charges were calculated for the program/project. Identify the type of indirect cost rate (provisional, predetermined, final or fixed), the Federal Agency with whom your rate is negotiated, the rate which is in effect during the grant period and the base to which the rate is applied.

Indirect costs are allocable to an EPA grant only if supported by an Indirect Cost Rate Agreement, Cost Allocation Plan, or Indirect Cost Rate Proposal as detailed in OMB Circulars A-87, A-122, and A-21, depending on your organizational type. States, Tribes and educational institutions must submit a copy of their current Negotiated Indirect Cost Rate Agreement to EPA with their application. Other organizations (i.e. local agencies and non-profits) must have a current Indirect Cost Allocation Plan or Indirect Cost Rate Proposal on file for review at the request of the Agency.

Line 7 - **Program Income**. If any income is expected to be generated from your program/project, describe the nature, source and estimated amount. Examples of program income include registration fees collected, income from the sale of products produced under a grant, and rental fees generated from equipment purchased with grant funds. The EPA project officer will negotiate the use of the program income with your agency in accordance with Federal regulations.

An example of a properly completed budget detail is included with this document.

ASSURANCES - NON-CONSTRUCTION PROGRAMS (SF-424B)

As an applicant for Federal Financial Assistance, you must assure that you will comply with all applicable Federal Statutes, Executive Orders, regulations, and policies governing the program/project. The required Assurances must be signed by the authorized representative who signed the SF-424 Facesheet. An original signature is required.

KEY PEOPLE LIST

Complete the enclosed "Key People List" and return it with your application. Check the box on the bottom of the form if you would like to be notified via email when EPA receives your application.

WORKPLAN

Attach a copy of your proposed work plan. Additional information regarding the requirements for an acceptable work plan may be found in 40 CFR Part 35 Subpart A, and other Parts applicable to your project. Any questions regarding the work plan or program objectives should be discussed with your EPA Project Officer.

REQUIRED CERTIFICATIONS

Certification Regarding Debarment, Suspension, and Other Responsibility Matters (EPA Form 5700-49)

Each prospective recipient of an EPA grant, loan, or cooperative agreement and any contract or subagreement participant thereunder must complete EPA Form 5700-49 "Certification Regarding Debarment, Suspension, and Other Responsibility Matters." The authorized representative is required to sign the certification for <u>each</u> application for Federal assistance. Your organization may fulfill this requirement by filing an annual certification form with original signatures with EPA's Grants Management Office. This requirement is established in 40 CFR Part 32.

Certification Regarding Lobbying and Disclosure of Lobbying Activities (Standard Form - SFLLL)

Note: Not applicable to Indian Tribes nor applicants receiving \$100,000 or less of Federal assistance.

This requirement generally prohibits recipients of Federal grants, cooperative agreements, contracts, and loans from using appropriated funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a specific grant, cooperative agreement, contract, or loan. Each recipient who requests or receives a Federal contract, grant, cooperative agreement, loan, or Federal commitment to insure or guarantee a loan, must also disclose lobbying. Each recipient must file a certification and, if required, a disclosure form with each submission that initiates agency consideration for the award of a Federal contract, grant or cooperative agreement exceeding \$100,000. Any subcontractors of the recipients receiving Federal funds in excess of \$100,000 must also file a certification form and a disclosure statement, if required.

The authorized representative is required to sign the form(s) which must be filed with each application for Federal assistance. Your agency may fulfill this requirement by filing an annual certification form with original signatures with EPA's Grants Management Office. This requirement is established in 40 CFR Part 34.

Preaward Compliance Review Report for All Applicants Requesting Federal Financial Assistance (EPA Form 4700-4)

Complete the Pre-Award Compliance Review Report, EPA Form 4700-4, and return it with your application. If a recipient receives more than one grant from EPA Region 9, you may choose to complete this form for all EPA Region 9 environmental programs by indicating on the form, under Part II "APPLICABLE TO ALL EPA, REGION 9 GRANTS". This form will be valid for one year from the date it is received by the Grants Management Office. All applicants should complete roman numerals I through V. If the information in Section VI through IX does not apply to your project or program, write N/A for "not applicable." The authorized representative is required to sign and date the form under Section X. Questions regarding completion of the form should be addressed to Gina Edwards, Office of Civil Rights, at (415) 947-4284.

Procurement Certification (Superfund Recipients Only) (EPA Form 5700-48)

All recipients of <u>Superfund</u> assistance are required to certify their Procurement System by completing the Procurement System Certification (EPA Form 5700-48). An applicant may self-certify their Procurement System if their system complies with 40 CFR 35.6550. The authorized representative is required to sign the certification for each application for Federal assistance. Your agency may fulfill this requirement by filing an annual certification form with original signatures with EPA's Grants Management Office. This requirement is established in 40 CFR 35, Subpart O.

SINGLE AUDIT ACT REQUIREMENTS

All recipients must comply with the Single Audit Act amendments as set forth in OMB Circular A-133, revised June 24, 1997. The Act requires recipients that expend \$300,000* or more in a year in Federal awards from all Federal sources to have a single audit or a program-specific audit for that year in accordance with the provisions of the Circular. Recipients that expend less than \$300,000* a year in Federal awards are exempt from Federal audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal government.

Audits shall be performed annually, unless the recipient made provisions previously for biennial audits as set forth in paragraphs (a) and (b) of Section .220 of the Circular. The costs of audits made in accordance with the provisions of this Circular are allowable charges to Federal awards. However, recipients may not charge the cost of auditing a non-Federal entity which has Federal awards expended of less than \$300,000* a year to a Federal award per Section .230 of A-133.

Audit report requirements and report submission are set forth in Sections .320 and .235 of the Circular. The recipient shall provide the number of reporting packages described in these sections to the Federal Audit Clearinghouse, Bureau of the Census, 1201 E. 10th Street, Jeffersonville, IN 47132.

*Note: The single audit threshold increases to \$500,000 for fiscal years ending after December 31, 2003.

ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

The Debt Collection Improvement Action of 1996, P.L. 104-134, requires that all federal payments be made via Direct Deposit/Electronic Funds Transfer (DD/EFT) and include the payee's Taxpayer Identification Number (TIN).

1) All recipients who have not registered for the DD/EFT payment method must do so by submitting the *ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM* (SF 3881) to:

U. S. EPA, Region 9 Finance Office (PMD-6) 75 Hawthorne Street San Francisco, CA 94105

Your agency must return this form in order to receive any payments from our office.

- 2) Please complete the section "PAYEE/COMPANY INFORMATION." The legal name on this enrollment form **must** match your grant award/application.
- 3) Please be sure to include your Taxpayer Identification Number. This is used by our agency to generate the electronic funds transfer.
- 4) Please bring this form to your banking institution and have them complete the section "FINANCIAL INSTITUTION INFORMATION." The ACH coordinator is a staff person located in your bank.
- 5) An authorized official at your banking institution must sign the bottom of the enrollment form.
- 6) Please make a copy for your records and one for your financial institution.
- 7) Upon EPA's receipt of this form, we will send your agency a follow-up letter confirming your enrollment in the EFT system.
- 8) As part of our internal control, EPA will wire a test payment of \$1.00 to the account indicated on your enrollment form.
- 9) When your office receives the \$1.00 in your bank account, please return the confirmation notice that is provided with the follow-up letter. Once EPA receives your confirmation notice, the DD/EFT enrollment process will be complete and all future payments will be made electronically.

If you have any questions regarding the ACH enrollment form, please contact Eddie Duenas at 415-972-3711 or Marie Ortesi at 415-972-3710 of the USEPA Finance Office.

*Note: Please complete the "Agency Information" section as it appears on the sample below.

	AGENCY	NFORMATION				
FEDERAL PROGRAM AGENCY						
U.S. Environmental	Protection Agency					
AGENCY IDENTIFIER: Region IX						
ADDRESS: 75 Hawthorne Street	(PMD-6)					
San Francisco, CA 94105						
CONTACT PERSON NAME: TELEPHONE NUMBER:						
Marie Ortesi or David Wood (415) 972-3710						
ADDITIONAL INFORMATION:	1 ,					

OMB Circulars and EPA Regulations

You should be familiar with the Federal requirements that govern Federal grants before you apply. These requirements often vary depending on your organization type and are established in law, Executive Order, Federal regulation, and the OMB Circulars.

OMB Circulars:

A-21	Principles for Determining Costs Applicable to Grants, Contracts, and other Agreements with Educational Institutions
A-87	Cost Principles for State, Local and Indian Tribal Governments
A-122	Cost Principles for Non-Profit Organizations
A-102	Grants and Cooperative Agreements with State and Local Governments
A-110	Grants and Cooperative Agreements with Institutions of Higher Education, Hospitals, and other Non-Profit Organizations
A-133	Audits of States, Local Governments, and Non-Profit Organizations.

EPA Regulations:

40 CFR Part	30	Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals and Other Non-Profit Institutions
	31	Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments and Indian Tribes
	35	State, Local, and Tribal Assistance

To obtain sections of the 40 Code of Federal Regulations (CFR), Parts 1-49, refer to the website http://www.epa.gov/region09/funding/ (Regulations).

To obtain the printed 40 Code of Federal Regulations (CFR), Parts 1-49, you may contact the Superintendent of Documents, United States Government Printing Office (USGPO), P.O. Box 371954, Pittsburgh, PA 15250-7954 at (202) 512-1803.

Catalog of Federal Domestic Assistance (CFDA) Number:

Block 10 of the SF424 Application requires a CFDA number. A listing of all current EPA assistance programs and their CFDA numbers can be found at http://www.cfda.gov/public/browse_agy.asp?agy_id=66&st=1. New CFDA numbers are regularly created, so refer to this web site often.

KEY PEOPLE LIST

Please show street address as well as Post Office Box Number where applicable.

AGENCY/ORGANIZATION DIRECTOR

(Individual wno	o is authorized to sign the assistance agreement application and award acceptance.)
NAME:	
TITLE:	
ADDRESS:	
TEI EPHONE.	FAX:
	ESS:
	PROGRAM/PROJECT DIRECTOR
(Technical p	program director or person responsible for the project as a contact person in Block #5 of the application.)
NAME:	
TITLE:	
ADDRESS:	
TELEPHONE.	FAX:
	ESS:
	FINANCE DIRECTOR
(Individua)	l responsible for maintaining the accounting and financial management system supporting expenditures, preparing the financial reports, etc.)
NAME:	
TITLE:	
ADDRESS:	
TELEPHONE.	FAX:
	ESS:
П	about this have if you would like an arrail asknowledge and of this Cropt Application
	check this box if you would like an email acknowledgment of this Grant Application
receivea i	by U.S. EPA. (Please provide an email address to receive the email acknowledgment)
ΕΜΔΙΙ ΔΓ	DDRESS:
	JDINE 00.

SAMPLE BUDGET DETAIL FORMAT

The detail for each object class category must be provided. Formats may vary, but all information below should be included in your application.

Δ	PER	SO	NN	FΙ
~ -		\mathbf{u}		

POSITION	NUMBER	SALARY	WORK YEARS	AMOUNT
a. PERSONNEL TOTAL				

R	FRI	NO	`F	BE	NF	FI	T.S
□ .			3 L	பட			

BASE	
RATE	
b. FRINGE BENEFITS TOTAL	

C. TRAVEL

Explain:		
c. TRAVEL TOTAL:		

D. EQUIPMENT: The Federal government defines equipment as tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Equipment with a lower acquisition cost may be budgeted here if the applicant's threshold falls below the Federal threshold.

ITEM	NUMBER	COST PER UNIT	TOTAL
d. EQUIPMENT TOTAL			

E. SUPPLIES

Itemize supplies as appropriate:	
e. SUPPLIES TOTAL	

F. CONT method (i.e.	RACTUAL [List each planned contract separately, type of service to be pr small purchase, sealed bids, competitive proposals) and the estimated cost]	ocured, pro	oposed prod	curemen
			·	
	f. CONTRACTUAL TOTAL			
G. CONS	STRUCTION (N/A)			
H. OTHE	R			
0				
	Other: Itemize as appropriate.			
-				
	OTHER TOTAL			
	I. TOTAL DIRECT COSTS:			
	J. INDIRECT COSTS: (BASE: \$ x RATE: %)			
	K. TOTAL PROPOSED COSTS:			
	FEDERAL FUNDS REQUESTED: \$			
	RECIPIENT SHARE OF TOTAL PROPOSED COSTS:%			
	FEDERAL SHARE OF TOTAL PROPOSED COSTS:%			

SAMPLE - COMPLETED BUDGET

		BUDGET INFOR	RMATION - Non-Const	ruction Programs		OMB Approval No. 0348-0044
		S	ECTION A - BUDGET SUMMAR	Y		
Grant Program Function	Catalog of Federal Domestic Assistance	Estimated Unobligated Funds		New or Revised Budget		
or Activity (a)	Number (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. PWSS	66.432	\$	\$	\$456,000	\$184,000	\$640,000
2.						
3.						
4.						
5. TOTALS				\$456,000	\$184,000	\$640,000
		SE	CTION B - BUDGET CATEGORI	ES		
6. OBJECT CLASS CA	TEGORIES	GRANT PROGRAM, FUNC		SCTION OR ACTIVITY		Total
		(1) Federal	(2) Match	(3)	(4)	(5)
a. Personnel		\$ 160,992	\$150,000	\$	\$	\$ 310,992
b. Fringe Benefits		31,308	\$34,000			65,308
c. Travel		10,742				10,742
d. Equipment		12,428				12,428
e. Supplies		3,000				3,000
f. Contractual		79,000				79,000
g. Construction		0				0
h. Other		5,000				5,000
i. Total Direct Charges (sum of 6a - 6h)		302,470	\$184,000			486,470
j. Indirect Charges		153,530				153,530
k. TOTALS (sum of 6i and 6j)		456,000	184,000			640,000
7. Program Income		\$	\$	\$	\$	\$ 0

SAMPLE	SECTION C - NON-FEDE	RAL RESOURCES	s	tandard Form 424A (4-88)		
(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. PWSS		\$184,000	\$	\$	184,000.00	
9.					0.00	
10.					0.00	
11.					0.00	
12. TOTAL (sum of lines 8 and 11)		184,000.00	0.00	0.00	184,000.00	
	SECT	ION D - FORECASTED CAS	H NEEDS			
13. Federal	(Total for 1st Year)	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	
	\$ 456,000	114,000.00	114,000.00	114,000.00	114,000.00	
14. NonFederal	\$ 184,000	46,000.00	46,000.00	46,000.00	46,000.00	
15. TOTAL (sum of lines 13 and 14)	640,000.00	160,000.00	160,000.00	160,000.00	160,000.00	
SECT	ION E - BUDGET ESTIMATES	OF FEDERAL FUNDS NEE	DED FOR BALANCE OF THE	PROJECT		
(a) Grant Program			FUTURE FUNDING PERIODS (Years)			
		(b) First	(c) Second	(d) Third	(e) Fourth	
16.		\$	\$	\$	\$	
17						
18.						
19.						
20. TOTALS (sum of lines 16 - 19)		0.00	0.00	0.00	0.00	
	SECTIO	N F - OTHER BUDGET INF (Attach additional sheets if Necessary				
21. Direct Charges: \$486,470 22. Indirect Charges: \$153,530						
23. Remarks: Please include anything not ful	lly explained in the budget d	etail (i.e. Indirect Cost Ro	ate, Base, etc.)			

SAMPLE BUDGET DETAIL FORMAT (FROM SF 424A, SECTION B TOTALS)

The detail for each object class category must be provided. Formats may vary, but all information below should be included in your application.

A. PERSONNEL

POSITION	NUMBER	SALARY	WORK YEARS	AMOUNT
Lab Assistant 1	2	\$22,500	2	\$45,000
Lab Assistant 2	1	20,000	1	20,000
Environmental Engineer II	2	50,000	2	100,000
Microbiologist, IV	1	44,000	2	88,000
Env. Health Specialist	1	23,976	.33	7,992
a. PERSONNEL TOTAL				\$310,992

B. FRINGE BENEFITS

BASE	\$310,992
RATE	21%
b. FRINGE BENEFITS TOTAL	\$65,308

C. TRAVEL

Explain:

Out of State (\$6,400)

of People

Las Vegas, NV 1
Washington, D.C. 2
San Diego, CA 1
Ann Arbor, CA 1
San Francisco, CA 3

Trips are scheduled to attend the American Water Works, Regional Workshop on New Regulations, Grant Negotiations, and Grant Workshop.

In State (\$4,342)

Based on estimate for milage (\$0.37/mile), \$45/day maximum lodging, and \$20/day maximum for meals.

c. TRAVEL TOTAL: \$10,742

D. EQUIPMENT: The Federal government defines equipment as tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Equipment with a lower acquisition cost may be budgeted here if the applicant's threshold falls below the Federal threshold.

ITEM	NUMBER	COST PER UNIT	TOTAL
Computers	2	\$3,500	\$7,000
Monitors	2	1,000	2,000
Laser Printers	2	1,287.50	\$2,575
File Cabinets	2	426.50	\$853
d. EQUIPMENT TOTAL			\$12,428

E. SUPPLIES

Itemize supplies as appropriate:	
Office Supplies	\$300
Field Survey Supplies	700
Lab Supplies	450
Software for Computers	1,550
e. SUPPLIES TOTAL	\$3,000

F. CONTRACTUAL [List each planned contract separately, type of service to be procured, proposed procurement method (i.e. small purchase, sealed bids, competitive proposals) and the estimated cost]

Intergovernmental Personnel Agreement (IPA)	\$47,800
Water Consultant, Inc Small Purchase	3,200
Attorney - Small Purchase	1,000
Hydrologist - Competitive Proposals	25,000
Copy Machine - Rental (Small Purchase)	2,000
f. CONTRACTUAL TOTAL	\$79,000

G. CONSTRUCTION (N/A)

H. OTHER

Other: Itemize as appropriate.	
Repairs - Computers	\$400
Repairs - Vehicle Maintenance	400
Phone - Long Distance	1,000
Rental of Conference Rooms (2 day @ \$1,050/day) for training	2,100
Postage	100
Printing for Reports (distributed at conference)	1,000
OTHER TOTAL	\$5,000

I. TOTAL DIRECT COSTS:	\$486,470
J. INDIRECT COSTS: (BASE: \$376,300 x RATE: 40.8%)	\$153,530
K. TOTAL PROPOSED COSTS:	\$640,000
FEDERAL FUNDS REQUESTED: \$640,000	
RECIPIENT SHARE OF TOTAL PROPOSED COSTS: 29%	
FEDERAL SHARE OF TOTAL PROPOSED COSTS: 71%	